ATTN MANAGER (319) 393-8818 155 Collins Rd NE, Ste B Cedar Rapids IA 52402

## Prepared by: Mark Christianson

Cell / Text: (319) 329-7100					(	Quote Date	Qu	Quote #	
mchris	stianson@push	pedalpull.com			10/25/2019		46895		
Billing Ad	dress		Shipping Addre	ping Address					
WILLIAMS WELLNESS CENTER ATTN: ACCOUNTS PAYABLE 317 8TH AVE STE A OELWEIN IA 50662				WILLIAMS WELLNESS CENTER ATT: JESSICA BURKHART 319-283-2312 317 8TH AVE SUITE A Oelwein IA 50662					
Account	No.			Customer Email					
		LNESS CENTER	r	nmever@citvofoe	meyer@cityofoelwein.org				
Item #	m # MFR MODEL Desc		Descri	ption Qty MSRP Price Extended					
73795	Core Health	9-5270-8G-LCD	8 SERIES GAUNT	LET W/LCD	1	7,695.00	4,895.00	4,895.00	
73419	PRECOR	PHRCB635G307	RBK 635 RECUME EXPERIENCE SEF (GLOSS METALLIC AZDY	RIES - P30	1	2,845.00	2,095.00	2,095.00	
70505	PRECOR	CAP3210XX105	900MHZ EXPERIENCE INTEGRATED RECEIVER EFX 635 ELLIPTICAL - P30 (NEW		2	249.00	0.00	0.00	
73252	PRECOR	PHRCE635G306			1	5,995.00	4,495.00	4,495.00	
15252			GLOSS METALLIC SILVER)			5,555.00	4,490.00	4,495.00	
70505	PRECOR	CAP3210XX105	900MHZ EXPERIE		1	249.00	0.00	0.00	
9938		TR	USED PRECOR 54	46i EFX	-1		300.00	-300.00	
9901 9977		FC DEL	FREIGHT COMME DELIVERY/INSTA		1		490.00 385.00	490.00 385.00	
	ms and Condition								
	sit and approve P.0 nt To: St.	o. with order. Balance d			Subtotal \$: 12,060.00		12,060.00		
3) Prices are 4) There will	subject to change be a 2% monthly s	be charged for additio 30 days after the quote service charge on all over tion and/or legal fees in		Sales Tax \$:		\$:	0.00		
<ul> <li>also responsible for any collection and/or legal fees involved in collecting past due accounts.</li> <li>5) The quote is computed to be performed during regular business hours. Any special request by the buyer necessary to complete work will be</li> </ul>						Total \$:		12,060.00	
paid by the t 6) Clerical er 7) Buyer agr 8) We have a defective go	buyer. rors are subject to ees to promptly fil 30 day limited exc ods. This policy ex	, <u>,</u>	Acceptanc These price hereby acc full unders	Acceptance of Proposal: These prices, specifications, and conditions are satisfactory and are hereby accepted. I am authorized to order the equipment listed with full understanding of the payment terms. Authorized Signature:					
P.O. Number:					Print Signature:				